STANDBY PREHOSPITAL RESOURCE

Effective: January 22, 2007
Replaces: August 1, 2004
Review: November, 2010

Resources:
None

I. Purpose

To provide direction to all system participants for the appropriate use of EMS System units for standby at incidents where there is no patient identified, but a high potential for prehospital medical services exists.

II. Standby

Prehospital units may be assigned to an incident when a high potential for prehospital medical service exists, including, but not limited to: protection of public safety personnel in the performance of their duty, protection of the public at large, during fire ground operations, at the direction of the Agency or Health Officer, during hazardous materials incidents, during search and rescue operations, and during law enforcement tactical operations.

III. Request Process

A. A medical resource standby may be requested by the following persons only:

1. The Incident Commander.
2. EMS Duty Chief.
3. The Contracted advanced life support (ALS) Provider Field Supervisor (includes only units supervised by the contracted provider, not all system units).

B. Commitment of an EMS system ambulance may be authorized only by the following:

1. The Contracted ALS Provider Field Supervisor (includes only units supervised by the contracted provider, not all system units).
2. EMS Duty Chief.

3. County Communications Watch Commander when contact with either the ALS Provider Field Supervisor or EMS Duty Chief is not possible.

C. The Contracted ALS Provider Field Supervisor will be advised immediately of any request for medical resource standby. In the event the Contracted ALS Provider Field Supervisor is not immediately available to respond, the closest available system ambulance will be dispatched and committed to the call. If the Contracted ALS Provider Field Supervisor is unavailable, the EMS Duty Chief shall be advised.

D. The Contracted ALS Provider Field Supervisor shall determine what type of resources to commit to the incident, including ALS and basic life support (BLS) ambulances, and/or supervisory personnel subject to modification from the EMS Duty Chief based on the resources requested. The EMS Duty Chief shall be notified of incidents involving the standby of a system supervisor and/or more than two (2) System ambulances.

E. All resources assigned to a medical resource standby will be committed to that standby until released.

IV. Documentation

A. All requests for 911 System medical resource standby shall be entered as an event, and all appropriate time stamps noted.

B. The Contracted ALS Provider Field Supervisor shall complete, and submit to the Agency within twenty-four (24) hours, an after action report of the event, including a reason for any ambulances committed, duration of the standby, and any medical care that was provided during the event. This report shall include all applicable incident command system (ICS) forms and mass casualty incident (MCI) documents.